

Membership Waiver Form

DISCLAIMER: EmpowHER Fitness strongly recommends that you consult with your physician before beginning any exercise program. You should be in good physical condition and be able to participate in the exercises. You should understand that when participating in any exercise or exercise program, there is the possibility of physical injury. If you engage in this exercise or exercise program, you agree that you do so at your own risk, are voluntarily participating in these activities, assume all risk of injury to yourself, and agree to release and discharge EmpowHER Fitness from any and all claims or causes of action, known or unknown, arising out of negligence or misuse of the program. As with any exercise program, if at any point during your workout you begin to feel faint, dizzy, or have physical discomfort, you should stop immediately and consult a physician.

Full Name: _____

Phone _____ Email _____

Date ____/____/____